

FILED EFFECTIVE

No. C 74642 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2008 1. Mailing Address: Correct in this box if needed. FLYING PIE PIZZARIA, INC. KIM J TRGUT ROBERT HANCOCK PO BOX 1097 355 W. MYRTLE BOISE ID 83701 83702	2. Registered Agent and Office (NOT A P.O. BOX) ROBERT B HANCOCK ESQ 290 BOBWHITE CT STE 300 BOISE ID 83706 3. New Registered Agent Signature.				
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	JOE LEVITCH	PO BOX 8695	BOISE	ID		83702
SECRETARY	HOWARD OLIVIER	"	"	"	"	"
DIRECTOR	"	"	"	"	"	"
5. Organized Under the Laws of:						
IDAHO C 74642		6. Signature: <u><i>R.B. Hancock</i></u>		Date: <u>10/27/08</u>		
		Name (type or print): <u>ROBERT B. HANCOCK</u>		Title: <u>REG. AGT.</u>		
Issued 10/23/2008 by CLH						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.